FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington. D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

PROCESSED

SEC USE ONLY

Serial

FFR 0 6 2003

Date Received

Name of Otte-High J check if this is an amendment and name has changed, a.,d indicate c	FINANCIA	71V <u>AL</u>	
The Woden Prospect	nange.)		,e
Filing Under (Check box(es) that apply): [] Rule 504 Type of Filing: [X] New Filing [] Amendment	[X] Rule 506	[] Section 4(6)	COE
A. BASIC IDENTIFICA	ATION DATA		1000
Enter the information requested about the issuer		PER O	§ 2003 >>
Name of Issuer ([] check if this is an amendment and name has changed, and ind	icate change.)		TANGET A
Fossil Resources, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code)		Telephone Number (Includi	ing Area Code)
17304 Preston Road, Suite 625, Dallas, Texas 75252 Address of Principal Business Operations (Number and Street, City. State, Zip Co (if different from Executive Offices) Oil and Gas Industry and Exploration Brief Description of Business	ode)	(972) 248-6 Telephone Number (Includi	
Type of Business Organization [X] corporation [] limited partnership, already formed [] limited partnership, to be formed	[] other (please	e specify):	
Actual or Estimated Date of Incorporation or Organization Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Se CN for Canada; FN for			[] Estimated
GENERAL INSTRUCTIONS FEDERAL: Who must file: All issuers making an offering of securities in reliance on an exe 77d(6).	mption under Regulation E	or Section 4(6), 17 CFR 230.501	et seq. or 15 U.S.C.

When to file: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below, or if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to file: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

STATE: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part—of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - * Each promoter of the issuer, if the issuer has been organized within the past five years;
 - * Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer:
 - * Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - * Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [] Promoter [x] Beneficial Owner [x] Executive Officer [x] Director [] General and/or Managing Partner

Full Name (Last name first, if individual)

Carl Poole

Business or Residence Address (Number and Street, City, State, Zip Code)

17304 Preston Road, Suite 625, Dallas, Texas 75252

Check Box(es) that Apply: []Promoter [x]Beneficial Owner [x] Executive Officer [x]Director []General and/or Managing Partner

Full Name (Last name first, if individual)

Bud W. King

Business or Residence Address (Number and Street, City, State, Zip Code)

17304 Preston Road, Suite 625, Dallas, Texas 75252

Check Box(es) that Apply:[]Promoter [x]Beneficial Owner [x]Executive Officer []Director []General and/or Managing Partner

Full Name (Last name first, if individual)

Mark L. Vanderkolk

Business or Residence Address (Number and Street, City, State, Zip Code)

17304 Preston Road, Suite 625, Dallas, Texas 75252

Check Box(es) that Apply: []Promoter []Beneficial Owner []Executive Officer []Director [] General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:[]Promoter []Beneficial Owner []Executive Officer []Director [] General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: []Promoter []Beneficial []Owner []Executive Officer []Director [] General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:[]Promoter []Beneficial Owner []Executive Officer []Director []General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

	B. INFORMATION ABOUT OFFERING	
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes No [X] []
	Answer also in Appendix, Column 2, if filing under ULOE.	
2.	What is the minimum investment that will be accepted from any individual?	\$16,112.50
3.	Does the offering permit joint ownership of a single unit?	Yes No [X] []
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	
Full	Name (Last name first, if individual)	
LONI	STAR SECURITIES, INC. less or Residence Address (Number and Street, City, State, Zip Code)	
Name	l Dallas Parkway, Suite 105, Addison, TX 75001 of Associated Broker or Dealer	
States (C	in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States) [AL] [AK] [\$\sqrt{AZ}\$] [\$\sqrt{AR}\$] [\$\sqrt{CA}\$] [\$\sqrt{CO}\$] [\$\sqrt{CT}\$] [DE] [DC] [\$\sqrt{FL}\$] [\$\sqrt{GA}\$] [HI] [ID] [\$\sqrt{IL}\$] [\$\sqrt{IN}\$] [\$\sqrt{IA}\$] [\$\sqrt{KS}\$] [\$\sqrt{KY}\$] [\$\sqrt{LA}\$] [ME] [MD] [MA] [MI] [\$\sqrt{MN}\$] [\$\sqrt{MN}\$] [\$\sqrt{MO}\$] [\$\sqrt{MT}\$] [\$\sqrt{NE}\$] [\$\sqrt{NV}\$] [NH] [\$\sqrt{NJ}\$] [\$\sqrt{NM}\$] [\$\sqrt{NC}\$] [ND] [\$\sqrt{OH}\$] [\$\sqrt{OK}\$] [\$\sqrt{QR}\$] [\$\sqrt{PA}\$] [RI] [\$\sqrt{SC}\$] [SD] [\$\sqrt{TN}\$] [\$\sqrt{TX}\$] [\$\sqrt{UT}\$] [VT] [\$\sqrt{VA}\$] [\$\sqrt{VA}\$] [WV] [WI] [WY] [PR]	[] All States
Full	Name (Last name first, if individual)	
Busii	ness or Residence Address (Number and Street, City, State, Zip Code)	
Name	e of Associated Broker or Dealer	
State ((s in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States)	[] All States
	[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	[] : th states
Full N	Name (Last name first, if individual)	
Busin	ess or Residence Address (Number and Street, City, State, Zip Code)	
Name	of Associated Broker or Dealer	
	in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(C	Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	[] All States
	(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)	
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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	FPROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Alread Sold
	Debt	S0	S()-
	Equity	S <u>-()-</u>	S()-
	[] Common [] Preferred		
	Convertible Securities (including warrants)	S0	S0
	Partnership Interests	S0-	S()-
	Other (Specify Working interests in oil and gas leases)	\$_\$ 902,300	\$_32,225.00
	Total	\$ \$ 902,300	\$ 32,225.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchase on the total lines. Enter "0" if answer is "none" or "zero."	Number of Investors	Aggregate Dollar Amoun of Purchases
	Accredited Investors	11	<u>\$ 32,225.00</u>
	Non-accredited Investors		\$ \$N/A
	Total (for filings under Rule 504 only)	N/A	3 <u>187.A</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amouni Sold
	Rule 505 N/A		S
	Regulation A		S
	Rule 504 N/A	-	S
	Total		\$
4.	a. Furnish a statement for all expenses in connection with the issuance and distribution of the securit Exclude amounts in relating solely to organization expenses of the issuer. The information may be given contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the	as subject to future	
	Transfer Agent's Fees	[]	\$()
	Printing and Engraving Costs	[]	S()
	Legal Fees	[]	\$()-
	Accounting Fees		S()-
	Engineering Fees	[]	\$ -0-

\$<u>135,345</u>

\$<u>210,345</u> SEC 1972 (5/91)

S_75,000

	C. OFFERING	G PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF I	PROCEEDS				
	b. Enter the difference between the aggrexpenses furnished in response to Part C-Que	regate offering price given in response to Part C-Question 1 and total stion 4.a. This difference is the "adjusted gross proceeds to the issuer."		<u>\$691,955</u>			
5.	purposes shown. If the amount for any purp	ross proceeds to the issuer used or proposed to be used for each of the ose is not known, furnish an estimate and check the box to the left of ed must equal the adjusted gross proceeds to the issuer set forth in	Payments to Officers, Directors & Affiliates	Payments To Others			
	Salaries and fees		[]S <u>-0-</u>	[] \$()			
	Purchase of real estate		[]\$0-	[S()			
	Purchase, rental or leasing and install	ation of machinery and equipment	[]S <u>-()-</u>	[] \$()			
	Construction or leasing of plant build	ings and facilities	[] \$()-	[] \$()-			
	this offering that may be used in exch	ding the value of securities involved in range for the assets or securities of another	[] \$0-	[]S <u>-U</u> -			
	Repayment of indebtedness	Repayment of indebtedness Working capital					
	Working capital						
		Other (specify):Development of oil and gas properties					
			[] \$ <u>691,955</u> [] \$ <u>691,955</u>	[]S <u>-0-</u> []S0-			
	Column Totals		() • <u>=:::,::=</u>	l J			
	Total Payments Listed (column totals	added)	[x <u>\$ 691,955</u>				
		D. FEDERAL SIGNATURE					
an		d by the undersigned duly authorized person. If this notice is filed unde S. Securities and Exchange Commission, upon written request of its stoh (b)(2) of Rule 502.					
19	ssuer (Print or Type)	Signature Date		,			
	Fossil Resources, Inc.	Cine Gade /3/1	03				
1	ame of Signer (Print or Type)	Title of Signer (Print or Type)					
C	arle Poole	President					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

		E. STATE SIGNATURE	
ł.		FR 230.252(e), (d), (e) or (f) presently subject to	Yes No any of the disqualification [] [x]
		See Appendix, Column 5, for state	response.
2.	The undersigned issuer hereby CFR 239.500) at such times as		of any state in which this notice is filed, a notice on Form D (17
3.	The undersigned issuer hereby offerees.	undertakes to furnish to the state administrato	rs, upon written request, information furnished by the issuer to
4.	Offering Exemption (ULOE) o		ns that must be satisfied to be entitled to the Uniform Limited stands that the issuer claiming the availability of this exemption
	uer has read this notification and k zed person.	knows the contents to be true and has duly cause	ed this notice to be signed on its behalf by the undersigned duly
l	(Print or Type) sil Resources. Inc.	Signatury Possee	Date 2/3/03
Name	of Signer (Print or Type)	Title of Signer (Print or Type)	

President

Instruction:

Carl Poole

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2 3				4		5		
	invest St	o sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Тур	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Units of Working Interests	Number of accredited investors	Amount	Number of non-accredited investors	Amount	Yes	No
ΔL									
AK									
AZ	Х		\$902,300						X
AR	Х		\$902,300						X
CA	X		\$902,300						Х
CO	X		\$902,300						Х
CT	X		\$902,300						X
DE									
DC									
FL	Х		\$902,300						X
GA	Х		\$902,300						X
111									
ID									
[L	X		\$902,300						Х
IN	X		\$902,300						X
IA	Х		\$902,300						X
KS									
KY	X		\$902,300						X
LA	Х	_	\$902,300						X
ME									
мD	X		\$902,300						N.
MA					·				
MI									
MN	Х		\$902,300						A
MS	X		\$902,300						X
<u>MO</u>	X		\$902,300					<u> </u>	X

APPENDIX

i		2	3	4			5			
	Intend t non-acc invest Sta (Part B-	oredited ors in ate	Type of security and aggregate offering price offered in state (Part C-Item 1)	Турс	Type of investor and amount purchased in State (Part C-Item 2) Number of accredited Number of non-accredited			State UL attach exp waiver	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I)	
State	Yes	No	Units of Working Interests					Yes	No	
MT	Х		\$902,300						X	
NE	X		\$902,300				-		X	
NV	X		\$902,300						X	
NH	X		\$902,300						X	
ŊĴ	Х		\$902,300						Х	
NM	Х		\$902,300	1	\$32,225				Х	
NY	Х		\$902,300						X	
NC	Х		\$902,300						X	
ND										
ОН	Х		\$902,300						Z	
ОК	Х		\$902,300						X	
OR	Х		\$902,300						X	
PA	Χ		\$902.300						X	
RI	-				<u></u>					
SC	Х		\$902,300						X	
SD										
TN	X		\$902,300						X	
TX	Х		\$902,300						X	
UT	Х		\$902,300						X	
VT.									1	
VA	Х		\$902,300						X	
WA										
WV								<u> </u>		
WI								<u> </u>		
WY							W			
PR										

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